

POSITION	INITIALS	ID NO.	DATE
ISSUE DETERMINATION			
TYPE CLASSIFIER	101	857	12/21/01
FORMALITY REVIEW	L	676	07/19/01
RESPONSE FORMALITY REVIEW	A		

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## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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